

2100

REQUEST FOR PATENT FEE REFUND										
1 Date of Request: <u>7/26/01</u>		2 Serial/Patent # <u>09/546,952</u>								
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED							
<input type="checkbox"/>	Filing		\$							
<input type="checkbox"/>	Amendment		\$							
<input type="checkbox"/>	Extension of Time		\$							
<input type="checkbox"/>	Notice of Appeal/Appeal		\$							
<input checked="" type="checkbox"/>	Petition		\$ 1240.							
<input type="checkbox"/>	Issue		\$							
<input type="checkbox"/>	Cert of Correction/Terminal Disc.		\$							
<input type="checkbox"/>	Maintenance		\$							
<input type="checkbox"/>	Assignment		\$							
<input type="checkbox"/>	Other		\$							
		7 TOTAL AMOUNT OF REFUND \$ 1240.								
		8 TO BE REFUNDED BY:								
10 REASON:		Treasury Check								
<input type="checkbox"/>	Overpayment	<input checked="" type="checkbox"/>	Credit Deposit A/C #:							
<input type="checkbox"/>	Duplicate Payment	9 <table border="1" style="display: inline-table; text-align: center;"> <tr> <td>S</td><td>0</td><td>--</td><td>1</td><td>5</td><td>9</td><td>4</td> </tr> </table>		S	0	--	1	5	9	4
S	0	--	1	5	9	4				
<input type="checkbox"/> No Fee Due (Explanation):										
Dismissed as moot										
11 REFUND REQUESTED BY:										
TYPED/PRINTED NAME: <u>Patricia Bond</u>		TITLE: <u>RF</u>								
SIGNATURE: <u>[Signature]</u>		PHONE: <u>308-6911</u>								
OFFICE: <u>Office of Petitions</u>										
*****THIS SPACE RESERVED FOR FINANCE USE ONLY*****										
APPROVED: <u>[Signature]</u>		DATE: <u>7/27/01</u>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B